Name in Full arella Brittingham

Certificate of Death

Died at Town Pocomoke County Worcester MARYLAND

Date 189 Month 12 Day 25 | Age Y. 60 M. D. | Native of American | Occupation Housewife

~~Male~~ Female | White ~~Colored~~ | ~~Single~~ Married Widow Widower Divorced | Number of children living 3

Husband of Wife Wm W Brittingham

Father's Name John Evans | Mother's Name Margaret Evans

Cause of Death: Primary Consumption | How long sick 2 yrs

Immediate Exhaustion

Accident, Suicide, Homicide

Reported by C. F. Hargis

Address Pocomoke

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 78708

Attended by Dr. _____

of _____

Seen by Coroner _____

of _____

Information contained in this certificate received from _____

of _____

Name in Full John. Dennis

Certificate of Death

Died at Town St Martins County Worcester MARYLAND

Date 1898 Month 12 Day 11 Age Y. 3 M. 6 D. Native of Maryland. Occupation Play

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

Husband of Wife 146c

Father's Name Charles Dennis Mother's Name Lucy Dennis

Cause of Death Primary Swallowing concentrated Rye. How long sick 6 days.

Immediate

Accident, ~~Suicide, Homicide~~

Reported by E Holland

Address Berlin Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6596

Ses Ebe, Holland

C. G. E. No 7
Berlin Md

Name in Full | Certificate of Death

Annie May Fassitt

Died at Town: Near Berlin County: Worcester MARYLAND

Date 1898 Month: Dec Day: 31 | Age Y. M. D.: 4 | Native of: maryland | Occupation: non

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female Colored Single ~~Widower~~ ~~Number of children living~~

Husband / Wife of

Father's Name: Teevel Purnell | Mother's Name: May Fassitt

Cause of Death: Primary | How long sick: 3 days

Immediate | 161 | ~~Accident, Suicide, Homicide~~

Reported by: Curtis J Evans

Address: undertaker Berlin

OVER

OVER

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU: 79706

Attended by Dr. no Dr in

of attendance

Seen by Coroner

of

Information contained in this certificate received from H. C. Gassitt

of Berlin Md

C.J.E. [illegible]

Name in Full

Miss Annie E. Hill

Certificate of Death

Hill

Died ~~at~~ Town near Snow Hill County Wor.

MARYLAND

Date 1898 Month Dec. Day 28 Age Y. 84 M. 11 D. 19 Native of Md ~~Occupation~~

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ ~~Number of children~~ living

~~Husband~~ ~~Wife~~ of

Father's Name Johnson Hill

Mother's Name Priscilla Hill

Cause of Death

~~Primary~~

Immediate apoplexy

42

How long sick one week

Accident, Suicide, Homicide

Reported by Burbage & Coomer Undertakers

Address Snow Hill Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

attending Physician

St. John's Hospital

Name in Full

Certificate of Death

Sarah A. Layfield

Died at Town Mar Snow Hill County Wor. MARYLAND

Date 1898 Month Dec Day 6 Age Y. 47 M. 9 D. 11 Native of Md ~~Occupation~~

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 5

~~Husband~~ Wife of Handy Layfield

Father's Name Wm Timmons Mother's Name Mary Timmons

Cause of Death ~~Primary~~ 118 How long sick 3 weeks

Immediate Childbirth ~~Accident, Suicide, Homicide~~

Reported by Burbage & Conner

Address Snow Hill Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

No Do. in attendance

Information ned. from

Mother of Decd.

Name in Full Lucindia ~~Myers~~ Morris

Certificate of Death

Died at Town Berlin County Wor MARYLAND

Date 189 5 Month 12 Day 20 Age Y. 71 M. 0 D. 10 Native of Md Occupation Matron

~~Male~~ ~~White~~ Married ~~Widow~~ ~~Divorced~~

Female Colored ~~Single~~ ~~Widower~~ Number of children living None

~~Husband~~ Wife of Noah Morris

~~Father's~~ ~~Mother's~~

~~Name~~ ~~Name~~ 141

Cause of Death Primary Old age How long sick

Immediate Bronchitis & Dil. Heart ~~Accident, Suicide, Homicide~~

Reported by E. Holland OVER

Address Berlin Md OVER

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Attended by Dr. E Holland

of Berlin Md

Seen by Coroner

of

Information contained in this certificate received from Patient

of

Name in Full | Certificate of Death

Mrs Elisabeth C Nock

Died at Town Worcester County " MARYLAND

Date 1898 Month 12 Day 27 Age Y. 34 M. 6 D. 8 Native of Worcester Occupation Housewife

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living 4

~~Husband of~~ Wife E W Nock

Father's Name J P Lankford Mother's Name Elizabeth Lankford

Cause of Death Primary Tuberculosis How long sick 18 months

Immediate Exhaustion & Dyspnoea Accident, Suicide, Homicide

Reported by Timm & Willis Sr

Address Pocomoke City Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full — Certificate of Death

Jennie Purnell

Died at — Town: Near Berlin — County: Worcester Co — MARYLAND

Date 1895 — Month: 12 — Day: 14 — Age: Y. 25 M. D. — Native of: Md — Occupation: Matron

~~Male~~ ~~White~~ ~~Married~~ ~~Widow~~ ~~Divorced~~

Female — Colored — Single — ~~Widower~~ — ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name: Aug Purnell — Mother's Name: Mary Purnell

Cause of Death — Primary: Consumption — How long sick: One year

Immediate: " — 22a — Accident, Suicide, Homicide

Reported by: E J Holland

Address: Berlin Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Attended by Dr. E Holland

of Berlin Md

Seen by Coroner

of

Information contained in this certificate received from Jennie Purnell

of her Mother

Berlin Md

C.J.E. No 8

Name in Full: Manilla Dewey Riggin

Certificate of Death

Died at — Town: Snow Hill — County: Worcester — MARYLAND

Date 1898 — Month: Dec. — Day: 4 — Age: Y. 1 M. 11 D. 7 — Native of: Md. — Occupation:

~~Male~~ White ~~Married~~ ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ Single ~~Widower~~ Number of children living 4

~~Husband~~ ~~Wife~~

Father's Name: Illinois Riggin — Mother's Name: ~~Charlotte~~ Ida Campbell

Cause of Death — Primary: 145a — How long sick: 2 hours

Immediate: Accidentally Shot — Accident, ~~Suicide~~, ~~Homicide~~

Reported by: C. P. Jones

Address: Snow Hill Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Mary Smack

Died at Town: Near Berlin. County: Worcester MARYLAND

Date 189 8 Month: 12 Day: 20 | Age Y. M. D. | Native of: Near Berlin | Occupation: House work

~~Male~~ Female | ~~White~~ Colored | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ | ~~Divorced~~ | Number of children living: 4

Husband / Wife of Levi. Smack

Father's Name

Mother's Name

Cause of Death: Primary: Child birth 118 | How long sick: One day

Immediate

Accident, Suicide, ~~Homicide~~

Reported by Joseph Pitts

Address Berlin Worcester Co. Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Attended by Dr. Jno. W. Pitts

of Berlin, Maryland

Seen by Coroner _____

of _____

Information contained in this certificate was received from _____

of _____

G. J. E. no 9

Name in Full

Certificate of Death

John Turner

Died near Town Pocomoke County Worcester MARYLAND

Date 1898 Month 12. Day 21 Age Y. M. D. about 60y Native of Maryland Occupation Janitor & White Washer

Male ~~White~~ Married ~~Widow~~ ~~Divorced~~

~~Female~~ Colored ~~Single~~ ~~Widower~~ ~~Number of children living~~

Husband ~~Wife~~ of Alice Turner

Father's Name Arthur Powell. Mother's Name Roberts

Cause of Death ~~Primary~~ 1526 ~~How long sick~~

Immediate Throat cut & skull mashed ~~Accident, Suicide~~, Homicide

Reported by William U Schoolfield Coroner

Address Pocomoke City Maryland

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79706

Seen by Coroner William W Schoolfield

of Pocomoke City

Attended by Dr. Corbin F Hayes

of Pocomoke City

Information contained in this certificate was received from William W Schoolfield Esq

of Pocomoke

Name in Full: David Petitte

Certificate of Death

Died at Town: Snow Hill County: Wor. MARYLAND

Date 1898 Month: Dec Day: 27 | Age Y.: 67 M.: 2 D.: 11 | Native of: Md | Occupation: Mechanic

Male ~~Female~~ White ~~Colored~~ Married ~~Single~~ ~~Widow~~ ~~Widower~~ ~~Divorced~~ Number of children living 9

Husband ~~Wife~~ of Cardelia Petitte

Father's Name Jno Petitte

Mother's Name Lizzie Petitte

Cause of Death: Primary

Immediate Consumption 22a

How long sick 3 yrs

Accident, Suicide, Homicide

Reported by Burbage Hammer

Address Snow Hill Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Paul Jones, M.D.

Information received from
Elias Pitith Bro. of dec.
Snow Hill
Md